

Date: May 6th, 2015

Al Redmer, Jr.
Maryland Insurance Commissioner
Office of the Insurance Commissioner
200 St. Paul Place - Suite 2700
Baltimore, MD 21202

RE: Redetermination of the Benchmark Plan for Essential Health Benefits

Dear Commissioner Redmer:

As you know, Maryland is required to re-determine its benchmark plan for the 2017 plan year Essential Health Benefit (EHB) definition. Each state must choose from one of ten insurance plans that can be used to establish the definition, three of which are federal employee plans. The other options consist of the state's three largest small group plans, three largest state employee plans, and the state's largest commercial HMO plan. The Association would like to better understand the plan options and how these plans meet the needs of people with diabetes therefore **I am requesting the explanation of benefits documents for the seven state-based plans.** The Association would then like to recommend which one of the plans provides the most adequate coverage for people with diabetes based on current standards of care .

Going into this process the Association would urge you to choose a plan where access is affordable and includes adequate coverage. It is critically important to people with, and at risk for, diabetes because foregoing or scaling back care because of access constraints can result in poor health outcomes and increased health care costs.

The Association believes essential benefits for the management, prevention, and care of diabetes should include:

- Diabetes screening for individuals at high risk,
- Services as determined by a treating health care provider;
- Prescriptions;
- Durable medical equipment, including blood glucose testing equipment and supplies and insulin pumps and associated supplies;
- Services related to pregnancy, including screening for diabetes, monitoring and treatment for women with preexisting diabetes and gestational diabetes, and postnatal screening;
- A yearly dilated eye exam by an eye-care professional with appropriate follow-up care as medically needed;
- Podiatric services;
- Diabetes education, including diabetes outpatient self-management training services; and
- Medical nutrition therapy services.

Thank you for your consideration of the critical health care needs of people with diabetes, and our request for the referenced plan documents. Please let me know if you need any additional information.

Sincerely,

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